



Magnetic Resonance / Transrectal Ultrasound Guided Biopsy of the Prostate Compared to Standard Transrectal Ultrasound Guided Biopsy for Diagnosis of Prostate Cancer

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s Title of Thesis: Magnetic Resonance / Transrectal Ultrasound Guided Biopsy of the Prostate Compared to Standard Transrectal Ultrasound Guided Biopsy for Diagnosis of Prostate Cancer

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Abstract

Background: Multiparametric magnetic resonance imaging (mp-MRI) may improve the detection of prostate cancer (PCa).

Objective: To compare mp-MRI transrectal ultrasound (TRUS)-fusion targeted biopsy with standard 12-core TRUS-guided random biopsy for overall and clinically significant PCa detection among biopsy-naïve patients with suspected PCa.

Patients and Methods: This ethical committee-approved, single-center, prospective, randomized clinical study (April 2018 to December 2019) included 98 biopsy-naïve patients referred for prostate biopsy based on

prostate specific antigen (PSA) values (PSA > 4 ng/ml) and/or suspicious digital rectal examination (DRE). Patients were randomized 1:1 to the mp-MRI or control group. Patients in the mp-MRI group underwent prebiopsy mp-MRI followed by 12-core TRUS-guided random biopsy and cognitive MRI/TRUS fusion targeted biopsy from each detected lesion. The control group underwent TRUS-guided random biopsy alone.

Results: Overall, 40 patients were evaluable in both the mp-MRI and control groups. The overall PCa detection rate and the clinically significant cancer detection rate were similar between the mp-MRI and control groups, respectively (42.5% [17 of 40] vs 40% [16 of 40], $p = 0.820$, and 35% [14 of 40] vs 30% [12 of 40], $p = 0.633$).

Conclusions: MP-MRI/TRUS-fusion targeted biopsy did not improve PCa detection rate

Keywords: Prostate- Cancer – Biopsy – Multiparametric magnetic resonance imaging